See Instructions on Back of Page 6 and Front of Page 7

Department of Health Services Toxic Substances Control Division

Please print or type. (Form designed for use on elite (12-pitch typewriter). 1. Generator's US EPA ID No. Manifest 2. Page 1 Information in the shaded areas UNIFORM HAZARDOUS Document No. is not required by Federal law. CAX |000 | 022 9917 WASTE MANIFEST A. State Manifest Document Number 8834635 3. Generator's Name and Mailing Address K.C. PHOTO ENGRAVING B. State Generator's ID 2666 E. NINA ST., PASADENA, CA. 91107 4. Generator's Phone (818 C. State Transporter's ID US EPA ID Number 308452 6 5. Transporter 1 Company Name CALL 1-800-852-7550 D. Transporter's Phone 698-0991 042 245 001 OMEGA RECOVERY SERVICES ICAD E. State Transporter's ID US EPA ID Number 8. 7. Transporter 2 Company Name F. Transporter's Phone K R R B K K R K K K K K K K K G. State Facility's ID US EPA ID Number 9. Designated Facility Name and Site Address 4P1014121214501011 OMEGA RECOVERY SERVICES H. Facility's Phone 12504 E. WHITTIER BLVD. 46394 698-0991 CAD 042 245 001 213) 90602 WHITTER CA13. Total 12. Containers Quantity Waste No. 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) No. Туре Wt/Vo State WASTE ORM-A N.O.S. NA 1693 211 212 FFA7 Other 212 (Flexosolvent - N-Butyl Alcohol, Perchloroethyl GENERATOR State 211 WASTE ORM-A N.O.S. NA 1693 CENTER 1-800-424-8802; (Empty drums previously contained flexosolvent) F001,F003 EPA/Other State EPA/Other K. Handling Codes for Wastes Listed Above RESPONSE J. Additional Descriptions for Materials Listed Above
a. Material for recycle b. Material for disposal d. C. NATIONAL 795-4127 *Emergency#818 15. Special Handling Instructions and Additional Information 里 Profile#B10044 CALL 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. SPIL If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. 8 EMERGENCY Day Year Month Signature Printed/Typed Name 10171215121 17. Transporter 1 Acknowledgement of Receipt of Materials Day Year ¥ Signature Printed/Typed Name ANSPORTE 占 18. Transporter 2 Acknowledgement of Receipt of Materials CASE Year Month Day Signature Printed/Typed Name 19. Discrepancy Indication Space 20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Month Day Year Signature Printed/Typed Name OLOMON

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Do Not Write Below This Line

avious editions are obsolete.

White: TSDF SENDS THIS COPY TO DOHS WITHIN 30 DAYS To: P.O. Box 3000, Sacramento, CA 95812

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